



# VACCINE REPLACEMENT FORM

## For Vaccine Reimbursement of Private Stock Only

*Document the vaccine borrowed from your private stock and the VVFC vaccine used as a replacement. Each row should be completed from left to right. This form, and all additional replacement forms, should be kept on file at your facility and made available to the VVFC office upon request. You may document different vaccine types on the same page, or you may use a separate page for each vaccine type.*

Pin: \_\_\_\_\_ Facility Name: \_\_\_\_\_ Contact: \_\_\_\_\_

VACCINE USED	PRIVATE STOCK USED ON VVFC CHILDREN			VVFC STOCK USED FOR REPLACEMENT		
	DATE	PRIVATE LOT	VVFC PATIENT	DATE	VVFC LOT	PRIVATE PATIENT

***Due to funding restrictions, VVFC stock cannot be used on non-VVFC eligible patients.  
VVFC stock can only be used to replace private stock used on VVFC eligible patients.***